



Benefit Summary 2016–2017

Helping you make informed
choices about your employee
benefits.

Table of Contents

Benefits Overview	3
Medical Benefits.....	4
Voluntary Dental Benefits	6
Voluntary Vision Benefits.....	6
Flexible Spending Accounts (FSAs)	7
Life and AD&D Insurance.....	7
Long-Term Disability Insurance	8
Contact Information	9

This document is an outline of the coverage proposed by the carrier(s), based on information provided by the City of Norwalk. It does not include all of the terms, coverage, exclusions, limitations, and conditions of the actual contract language. The policies and contracts themselves must be read for those details. Policy forms for your reference will be made available upon request.

The intent of this document is to provide you with general information regarding the status of, and/or potential concerns related to, your current employee benefits environment. It does not necessarily fully address all of your specific issues. It should not be construed as, nor is it intended to provide, legal advice. Questions regarding specific issues should be addressed by your general counsel or an attorney who specializes in this practice area.

Benefits Overview

City of Norwalk is proud to offer a comprehensive benefits package to eligible, permanent full-time employees who work at least 30 hours per week. The complete benefit package is briefly summarized in this booklet. You will receive plan booklets, which give you more detailed information about each of these programs.

You share the costs of some benefits (medical, dental, and vision), and City of Norwalk provides other benefits at no cost to you (life, accidental death & dismemberment).

Benefits Offered

- » Medical
- » Dental
- » Flexible Spending Account (FSA)
- » Life and AD&D
- » Long-Term Disability
- » Vision

Eligibility

You and your dependents are eligible for City of Norwalk's benefits on the first of the month following date of hire.

Eligible dependents are your spouse, unmarried children under age 26, disabled dependents of any age. Elections made now will remain until the next open enrollment unless you or your family members experience a qualifying event. If you experience a qualifying event, you must contact HR within 30 days.

Medical Benefits

Administered by Wellmark Blue Cross Blue Shield of Iowa

Comprehensive and preventive healthcare coverage is important in protecting you and your family from the financial risks of unexpected illness and injury. Comprehensive healthcare also provides peace of mind. In case of an illness or injury, you and your family are covered with an excellent medical plan through City of Norwalk.

Deductibles

***The City annually self-funds a portion of employees' medical deductible and out of pocket. The employee share of the \$4,000 single and \$8,000 family deductibles are \$500 for single and \$1,000 for family. The employee share of the \$6,350 single and \$12,700 family out of pocket is \$2,000 for single and \$4,000 for family. The coverage period is based on a calendar year. The self-funding only begins when members have claims that include deductible and out of pocket expenses for inpatient and outpatient services.**

With the PPO, you may select where you receive your medical services. If you use in-network providers, your costs will be less but you do have coverage for out of network providers with higher costs to you and you may be balance billed. Wellmark Blue Cross and Blue Shield of Iowa provides coverage to 98% of the physicians and 100% of the hospitals in Iowa. You will also have coverage through the Blue Card Network nationally. Simply ask if the provider is in the local Blue Cross and Blue Shield PPO network. If so, your benefits will process at the PPO network level.

Alliance Select Plus Plan (PPO)

	In-Network	Out of Network
Lifetime Benefit Maximum	Unlimited	
Annual Deductible* <i>This is the amount you are responsible for of your deductible not what is purchased from Wellmark</i>	*\$500 Single \$1,000 Family	
Annual Out of Pocket Maximum* <i>This is the amount you are responsible for of your out of pocket maximum not what is purchased from Wellmark</i>	*\$2,000 Single \$4,000 Family	
Coinsurance	20%	30%
Doctors Office Visit		
Primary Care Physician (PCP)	\$30 Copayment	Deductible then 30%
Specialist Office Visits	\$30 Copayment	Deductible then 30%
Chiropractic Care	\$30 Copayment	Deductible then 30%
Preventative Screenings	Covered at 100%	NA
Prescription Drugs		
Retail Tier 1 Generic Drug	\$8 Copayment	
Retail Tier 2 Formulary Drug	\$35 Copayment	
Retail Tier 3 Non-Formulary Drug	\$50 Copayment	
	*refer to www.wellmark for PA and quantity limits	
Emergency Room	\$200 Copayment	
Outpatient Surgery/Services	Deductible then 20%	Deductible then 30%
Inpatient Services	Deductible then 20%	Deductible then 30%

Dental Benefits

Administered by Principal Financial Group

Good oral care enhances overall physical health, appearance and mental well-being. Problems with the teeth and gums are common and easily treated health problems. Keep your teeth healthy and your smile bright with the City of Norwalk dental benefit plan.

Amount You Pay PPO Network/Non-Network	
Annual Deductible	\$25 Single \$75 Family (3 family)
Annual Benefit Maximum	\$1,000 Per Person
Preventative Dental Services <ul style="list-style-type: none"> Routine Exams-two per calendar year Routine Cleanings-four per calendar year (one additional cleaning for expectant mothers, diabetics and those with heart disease) X Rays (bite wings every 12 months, full mouth every 5 years) Under age 19, Sealants, Space Maintainers, Fluoride Treatments-one per calendar year	Covered at 100%
Basic Dental Services <ul style="list-style-type: none"> Cavity Repair-fillings Tooth Extractions Emergency Exam (annual limit applies) Simple Oral Surgery 	Deductible then 20%
Major Dental Services <ul style="list-style-type: none"> Root Canals Gum and Bone Disease Cast Restorations Crown Inlays, Onlays, Cast Post and Core General Anesthesia (only for certain procedures) Endodontics (root canal) Implants 	Deductible then 50%
Orthodontic-Children only	No Deductible, 50% up to \$1,000 Lifetime Maximum

Monthly Medical Cost		Monthly Dental Cost	
Single	\$23.02	Single	\$0.00
Employee & Spouse	\$46.11	Employee & Spouse	\$57.96
Employee & Children	\$42.69	Employee & Children	\$57.96
Family	\$68.59	Family	\$57.96

Voluntary Vision Benefit

Administered by VSP

Regular eye examinations can not only determine your need for corrective eyewear but may also detect general health problems in their earliest stages. Protection for the eyes should be a concern to everyone.

Voluntary Vision through VSP		
Doctor Network	VSP Choice Network	
Covered Charges	Benefit	Frequency
Exams	\$10 Copayment	One exam every 12 months
Prescription Glasses	\$25 Copayment	Every 12 Months
Lenses	Single vision, lined bifocal, lined trifocal and lenticular lenses; polycarbonate lenses for dependent children under age 18	
Frames	\$150 Allowance for a wide selection of frames; 20% off amount over allowance	Every 24 Months
Elective Contacts	Up to \$60 Copay for standard and premium elective contact lens exam	Every 12 months
	\$150 allowance	Contacts are instead of Frames and lenses
Necessary Contacts	\$25 Copay Covered in full for member who have specific conditions	Every 12 Months Contacts are instead of Frames

Monthly Rates

Employee	\$7.97
Employee & Spouse	\$16.19
Employee & Children	\$17.51
Family	\$28.11

Life and AD&D Insurance

Insured by Principal Financial Group

Basic Benefit Amount

\$40,000 employee

Accidental Death Benefit

Amount is the same as the Basic Life amount.

Waiver of Premium

Life insurance continues for totally disabled employees without payment of premium if:

- » Disability begins while the employee is insured
- » Disability begins prior to age 60
- » Proof of disability is given to Carrier, prior to the end of the Disability Elimination Period
- » Proof of continued disability is verified periodically, according to the terms of the contract

Eligible Employees

Full time Employees

Premium

Included in the packaged premium amount

Voluntary Life and Voluntary AD&D

Insured by Principal Financial Group

You may purchase life and AD&D insurance coverage. You may also purchase life and AD&D insurance for your dependents if you purchase additional coverage for yourself. You are guaranteed coverage in the amount of \$100,000, and up to \$25,000 for your spouse, up to \$10,000 for your children without answering medical questions if you enroll when you are first eligible. You may purchase an additional amount of coverage on yourself up to a maximum of 5 times your annual salary and additional amounts on your spouse and dependents if you answer health questions and are approved for coverage. AD&D is included \$.036 per \$1,000

Employee— Increments of \$10,000; up to a maximum of 5 times your annual salary or maximum of \$300,000

Spouse— Increments of \$5,000- same as employee rates and based on employee's age. No more than employee's amount

Children— Increments of \$2,000 up to \$10,000 for \$2.00 per month covers all children

Age	Monthly Premium per \$1,000 of Coverage
<29	\$.144
30-34	\$.167
35-39	\$.202
40-44	\$.271
45-49	\$.412
50-54	\$.626
55-59	\$1.412
60-64	\$1.595
65+	\$1.695

Long-Term Disability Insurance

Meeting your basic living expenses can be a real challenge if you become disabled. Your options may be limited to personal savings, spousal income and possibly Social Security. Disability insurance provides protection for your most valuable asset—your ability to earn an income.

LTD coverage provides income when you have been disabled for 90 days or more. Your benefit is 60% of your monthly earnings, up to \$6,000 per month. This amount may be reduced by other deductible sources of income or disability earnings. Benefit payments can continue to age 65 if you are under age 60 at the time of disability.

Eligible Employees

Full time employees

Pre-existing Provision

Any condition that existed in the 6 months prior to your effective date is not eligible for any benefits until you have been covered under the plan for 12 months.

Premium

Included in your packaged premium. The amount of premium is added to your salary amount and subject to taxes. This provision was added to provide any benefit paid to you on a tax free basis. Included in the premium is a travel assistance program at no additional cost.

Flexible Spending Accounts (FSAs)

Administered by Kabel Business Services

You can save money on your health care and/or dependent day care expenses with an FSA. You set aside funds each pay period on a pre-tax basis and use them tax-free for qualified expenses. You pay no federal income or Social Security taxes on your contributions to an FSA. (That's where the savings comes in.) Your FSA contributions are deducted from your paycheck before taxes are withheld, so you save on income taxes and have more disposable income.

Healthcare Spending Limit \$2,600

Dependent Care Spending Limit \$5,000 or \$2,500 if married and filing separately

Here's How an FSA Works

1. You decide the annual amount you want to contribute to either or both FSAs based on your expected health care and/or dependent childcare/elder care expenses.
2. Your contributions are deducted from each paycheck before income and Social Security taxes, and deposited into your FSA.
3. You are reimbursed from your FSA. So, you actually pay your expenses with tax-free dollars.

Kabel Business Services offers different options for submitting your Flex claim form and receipts:

Mail to Kabel Business Services
1454 30th Street, Suite 150
West Des Moines, IA 50266-1312
Fax to 515-224-9256
Upload to www.myflexonline.com

Contact Information

If you have specific questions about any of the benefit plans, please contact the administrator listed below, or your local human resources department.

Benefit	Administrator	Phone	Website/Email
Medical	Wellmark BCBS of Iowa	1-800-524-9242	www.wellmark.com
Dental/Life/LTD	Principal Financial Group	800-986-3343	www.principal.com
Vision	VSP/Principal	800-877-7195	www.vsp.com
Flexible Spending Account	Kabel Business Services	800-300-9691	www.kabelbiz.com
Arthur J. Gallagher Account Manager Senior Account Executive	Renee Lehman Jami Klootwyk	515-440-8405 515-309-6229	www.ajg.com Renee_Lehman@ajg.com Jami_Klootwyk@ajg.com

This benefit summary prepared by:



Arthur J. Gallagher & Co.
For:

City of Norwalk

